Approved for use through 06/30/2010. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Effective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/533,398 **FEE TRANSMITTAL** April 30, 2005 For FY 2008 First Named Inventor Charles C. Hart Examiner Name Neal, Timothy J. Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3731 TOTAL AMOUNT OF PAYMENT \$180.00 Attorney Docket No. 2395-USP-PCT-US METHOD OF PAYMENT (check all that apply) Money Order Other (please identify): Deposit Account Deposit Account Number: 01-2215 Deposit Account Name: Applied Medical Resources For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES Fee (\$) Small Entity Small Entity Small Entity Application Type Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Utility 310 155 510 210 255 105 210 105 100 130 Design 50 65 Plant 210 105 310 155 160 80 Reissue 310 155 510 255 620 310 Provisional 210 105 n O 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$) 50 Each claim over 20 (including Reissues) 210 Each independent claim over 3 (including Reissues) 105 370 Multiple dependent claims 185 **Total Claims** Extra Claims Fee (\$) **Multiple Dependent Claims** Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20 Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims - 3 or HP = HP = highest number of independent claims paid for, if greater than 3, 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof **Total Sheets** Extra Sheets - 100 = /50 = (round up to a whole number) x Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Information Disclosure Statement 180

| SUBMITTED BY      |                  |   |                        |
|-------------------|------------------|---|------------------------|
| Signature         | /DGM/            | Registration No.<br>(Attorney/Agent) 53,257 | Telephone 949-713-8233 |
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This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a bountil by the public which is to life (and by the USFT to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USFT. Then will vary depending upon the individual case. Any common the amount of time you require to complete this form and/or suppositions for welcularing this further, should be sent to the Christ Information Cforer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.